

Blacks* account for just 12.8 percent of the U.S. population but constituted 47.6 percent of the adult and adolescent AIDS cases reported in the year ending June 30, 2001.^{1,2} The burden of cases among black children is even more disproportionate: Of the 194 AIDS cases reported during the year ending June 30, 2001, among children under age 13 a total of 128 (66 percent) were among black children.³

SURVEILLANCE

Black men accounted for 42.3 percent of AIDS cases reported among males in the year ending June 30, 2001.⁴ They are more likely than all males to contract HIV through injection drug use (IDU) (32 percent vs. 26 percent) and heterosexual contact (20 percent vs. 14 percent), and their exposure category is less likely to be men who have sex with men (MSM) (41 percent vs. 53 percent).⁵

From July 2000 through June 2001, more than 6 of every 10 reported cases (63.7 percent) among females were among blacks.⁶ In 2000, two-thirds of female cases (66 percent) were contracted through heterosexual contact; 31 percent were transmitted through IDU.⁷

Declines in AIDS incidence resulting from the introduction of highly active anti-retroviral therapy have slowed dramatically and are now essentially nonexistent among blacks: The estimated decrease was just 0.38 percent from 1999 to 2000. The decline for all populations combined was 1.3 percent.⁸ The estimated decrease in AIDS mortality from 1999 to 2000 was also lower among blacks (9.3 percent) than among the total population (11.2 percent).⁹

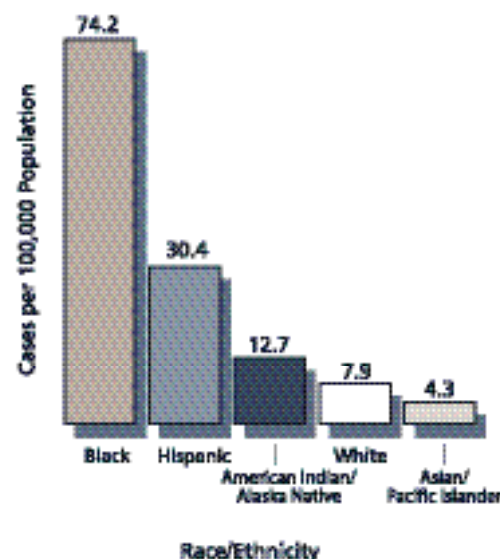
CRITICAL ISSUES

Evidence indicates a resurgence of risky behavior and extraordinarily high seroprevalence rates among some black MSM populations. Phase II of the Young Men's Study examined MSM ages 23 through 29 and found that 13 percent who frequented certain public venues were HIV positive. Prevalence was a staggering 32 percent among blacks and 14 percent among Hispanics, compared with just 7 percent among whites.¹⁰

HIV-positive individuals in care are poorer than the general population. The HIV Cost and Services Utilization Study found that "compared with others in the nonelderly population, adult patients with HIV were about half as likely to be employed, to have a household income above the 25th percentile, or to have private insurance."¹¹

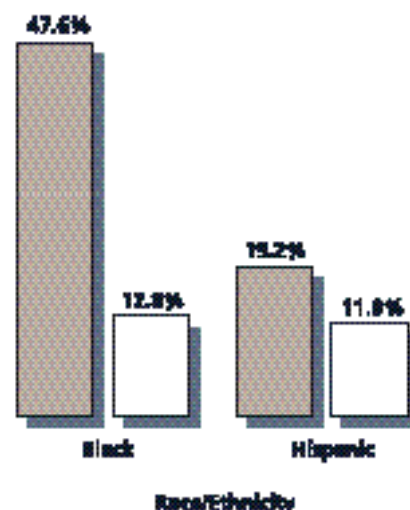
In the 2-year period 1999–2000, 23.9 percent of blacks lived below the poverty line, compared with 9.9 percent of whites.¹² In 2000, 18.5 percent of blacks were

Adult and Adolescent
AIDS Rates, 2000¹⁶



The Disproportionate Impact of
AIDS on Minorities^{1, 2}

■ Proportion of AIDS Cases Reported July 2000–June 2001
 □ Proportion of U.S. Population



*The term "black" is used throughout this document to be consistent with demographic classifications in referenced data sources.

uninsured, compared with 12.9 percent of whites.¹³

- n In a 2000 survey, blacks ranked AIDS as the number one health issue facing the Nation, tied with cancer (41 percent); however, this was a lesser percentage than in 1995, when 56 percent said that AIDS was the Nation's most urgent health issue. Like many Americans, some blacks misunderstand how HIV is transmitted: For example, in the same survey, 44 percent believed that HIV can be transmitted through kissing.¹⁴
- n HIV-positive blacks, Hispanics, women, and individuals without private insurance continued to be less likely than whites to receive the care they need.¹¹
- n Blacks are more likely to live in medically underserved areas than whites; almost two-thirds of community and migrant health center patients are racial and ethnic minorities.¹⁵

AFRICAN AMERICANS AND THE CARE ACT

- n In 2000, blacks constituted 47 percent of CARE Act clients and a much higher proportion in some service settings.
- n To further expand access to care, \$34 million was dedicated to reaching minority populations through the Congressional Black Caucus Initiative in FY 2001.
- n In 1999, Title IV of the CARE Act created the African American Children's Initiative to further reduce perinatal HIV transmission and increase access to quality care for black children.
- n In 1999, HRSA's HIV/AIDS Bureau awarded \$3.3 million for nine Targeted Provider Education Demonstration (TPED) grants. These grants support HIV/AIDS education and training for health and support providers in racial and ethnic minority communities disproportionately affected by HIV/AIDS.
- n In 2000, a National Minority AIDS Education and Training Center was established to better address the HIV/AIDS clinical care training needs of providers in underserved minority communities.

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